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I.

M. LARREY ON SOME OF THE DISEASES
OF THE TESTIS.*

THIS veteran, whose experience in the tented field has been great, and whose situation as surgeon in chief to the Military Hospital of the Royal Guard must have enhanced his opportunities for observation, has published in his *Clinique Chirurgicale* some interesting remarks on diseases of the testicle. Perhaps it may be instructive to compare the opinions of the worthy Baron with those of Sir Astley Cooper, on some points of pathology and practice.

1. *Wounds of the Testicle.*—M. Larrey remarks that these are not succeeded by such bad effects, as the nature and sensibility of the organ would have led us to suppose. A Swiss was lately in the Military Hospital, who had received a cut from a very sharp knife through the whole left side of the scrotum. The instrument had divided the tunica vaginalis, and corresponding portion of the testicle. The wound was dressed with mild ointment and compresses dipped in a camphorated wash, and the scrotum suspended; little suppuration took place; and on the twenty-fifth or twenty-sixth day the wound was perfectly healed. The testis appeared smaller and

more contracted than its fellow. If the testis is so injured by a projectile as to be denuded of its tunics, or extensively destroyed in its texture, it must of course be removed. If a violent contusion is followed by ecchymosis, leeches, slight compression by dressings dipped in a stimulating lotion, as one of camphor or ammonia, position, diet, and a gentle emetic to prevent the sympathetic affection of the stomach, are the measures employed by M. Larrey with success.

2. *Inflammation of the Testicle.*—This may be either from over-exertion or sympathetic. The first is rather rare, and is the only one, according to M. Larrey, for which leeches ought to be applied. After these, discutient and sedative lotions with gradual compression effect a cure. The swelling of the organ occasioned by extreme continence and retention of the seminal secretion is characterized by the size of the part, the tensive pain, the rapid dilatation of the spermatic veins, and the great inconvenience experienced in walking. Baths of cold water, even ice, cooling drinks, and the horizontal posture, speedily relieve the symptoms. M. Larrey denies that great continence is so injurious as some authors have supposed.

In the simple inflammation of the testis from gonorrhœa, the membranes are affected as well as the

* *Clinique Chirurgicale*, Tome III.

gland itself; if left to itself it may terminate in abscess, but rarely in sloughing. Sanguineous evacuations or leeches are, in M. Larrey's opinion, more injurious than beneficial, and seem to give rise to abscess in some, to hydrocele in others. We doubt whether many practitioners on this side of the Channel will agree with the Baron on these points. His practice consists in introducing into the urethra a small elastic bougie, spread thickly with a gummy preparation of opium, and in giving sedative demulcent drinks, with pills of camphor or of nitre and hyoscyamus. An embrocation of camphorated oil of camomile is rubbed upon the scrotum, and slight compression applied by means of a flannel suspensory. When resolution is commencing, a gentle emetic is prescribed. This mode of proceeding is hardly to be compared with the more energetic one adopted in this country.

When suppuration takes place, which is usually in the epididymis, we should encourage it by fomentations, and open it as early as fluctuation can be felt. The abscess generally heals without difficulty, excepting when the body of the testis is affected; this is usually deeply disorganized and destroyed.

3. *Nervous Affection, or "Irritable Testis."*—M. Larrey has only seen two cases of this kind, one in an officer of the guard, and the other in a young Parisian lawyer. It was characterized by violent pain extending from the cord to the testicle and occurring in variable paroxysms, retraction of the testis during the latter, moroseness and despondency of temper, and loss of sleep. M. Larrey has remarked, as Sir Astley Cooper has

done, that depletion is injurious. If the pain attacks the loins, M. L. uses cupping and moxa, and the latter may be applied in the course of the cord. These means succeeded perfectly in the two cases already adverted to.

4. *Wasting of the Testicle.*—This has been remarked by Sir Astley Cooper as a consequence of inflammation, and by Mr. Brodie, if we remember right, of indulgence in masturbation. Baron Larrey gives a more detailed account of the several causes of this curious affection. Sometimes, when the swelling produced by mechanical injury has subsided, the testicle gradually diminishes in size until it completely wastes. In some cases which our author relates in another part of the work, a wound in the back of the neck, affecting the cerebellum, has been followed by more or less wasting of these organs. The abuse of venery; the employment of preparations of opium, whether applied externally or injected into the urethra for gonorrhœa; and especially immoderate indulgence in alcoholic liquors containing much narcotic matter, are very active causes of the complaint.

At the end of the first campaign in Egypt, a number of the soldiers of the French army complained of the almost total disappearance of their testicles, without any venereal affection to account for it. They remarked that they began by losing the sensibility of the generative organs, which no longer preserved their vigor or their form, but gradually softened. So slow and insensible was the change, that they usually only discovered the malady when the testicles had nearly disappeared. On examination at this period, they were found

near the ring resembling beans, whilst the cord was equally diminished and wasted. When both testicles were affected, the patient was deprived of his sexual powers and desires ; he became melancholic ; the voice was altered ; and the beard ceased to grow. Nearly fifty soldiers were judged incapable of service on these accounts.

M. Larrey attributes the disease to the extreme heat of the Egyptian climate and the laborious marches through the desert, which softened the texture of the testicle, and occasioned at first a kind of enlargement, succeeded by the wasting in question. M. Larrey also assigns a destructive effect to the use of alcoholic and narcotic substances, but cannot explain very clearly their modus operandi. Into the composition of the brandy of the country, there enter several plants of the class of solanum, such as the pimento and the berries of the cherry laurel. M. Larrey thinks it probable, that the action which such substances exercise on the nerves of the stomach, is transmitted sympathetically to the intestines, and occasions their absorption. The ancients, it is said, procured the same thing by the application, for a length of time, of the concrete juice of hemlock to the scrotum. These conjectures of the Baron's must be taken for what they are worth, but it is not improbable that the immoderate use of such substances, combined with fatigues in a burning and enervating climate, may exercise a mysterious agency on the glands of the testes.

When the wasting is complete, art possesses no power to renovate the organ. In the earlier stages of the malady, we may, perhaps, effect some benefit by withdrawing,

as far as possible, its causes, and by employing some vapor-baths, with dry friction on the surface of the body, irritation in the lumbar and sacral regions, tonics, and generous food. Spirituous liquors should be avoided, or, at all events, procured without adulteration. A suspensory ought always to be worn in warm climates, and frequent ablution of the body with cold vinegar and water, and abstinence from immoderate venery, are necessary as preventive measures. M. Larrey has had several soldiers affected with this complaint under his care in France. It pursued the same course as in Egypt, and the patients confessed that they had been addicted to immoderate indulgence in venery, and strong, adulterated spirituous liquors. In one of these individuals, both testes in a short time almost disappeared. From being originally of a very robust constitution, he lost his beard and manly features, and looks like a woman. A soldier, whilst landing from a vessel in Egypt, received a violent blow upon the back of the neck, after which the testicle wasted to the utmost degree. These facts collected by the Baron are curious and worth perusal.

5. *Hypertrophy of the Testicles.*—An excessive growth of the female breast, without any appreciable change of structure, is not a very uncommon occurrence, but we were not previously aware of the existence of such an affection of the testicle. M. Larrey has seen it twice in the Hospital of the Guard. The first patient was 26 years of age, and both the testicles had acquired considerable volume, without exhibiting any perceptible morbid alteration, or occasioning inconvenience, except from their

weight. The penis was incapable of erection, but the general health was good. Frictions on the scrotum and in the course of the cord with "double Neapolitan ointment," in small quantities and at long intervals; embrocations of camphorated oil of camomile; uniform compression by a flannel suspensory; slight diaphoretics, combined with bitters, and the horizontal position, reduced the testes in three months to their natural size. In the other case, the testicles were as large as the fist, and, although in excellent health, this patient also had lost the power of erecting the penis. The same treatment as before, continued for six months, was perfectly successful.

II.

CASE OF EXTRA-UTERINE CONCEPTION.

By GEORGE DOUCHEZ, Esq., Member of the Royal College of Surgeons in London, &c. &c.

From the London Medical Gazette.

THE following are the particulars of a case of extra-uterine conception, which lately fell under my observation.

Mrs. G—, æt. 26, a newly-married lady, following the profession of an actress, who had previously had three children by a former husband, and had suffered from several abortions, was married last January, and became pregnant about the month of March. In the middle of May she was seized with uterine haemorrhage, and in a few days she aborted, and recovered by the assistance of the remedies usually prescribed in such cases. About the latter end of July she was again seized with flooding, attend-

ed with severe pain in the hypogastric region, and which occurred to so alarming an extent as to frighten all her friends. She was doubtful as to whether she was again pregnant; she had menstruated about a month after her last abortion, but had passed over the second period without any "show" of the catamenial discharge. She had all the constitutional symptoms of pregnancy—such as heartburn, sickness of the stomach, &c. The diluted sulphuric acid, with infusion of roses, and the occasional use of sedatives and purgatives, were the remedies employed. She continued in this state for about a fortnight, with excessive menstrual discharge; and, from the large pieces of coagula which had passed, it was doubtful whether she had or had not miscarried. During this last attack Dr. Merriman saw her, in consultation with myself, who was also doubtful as to whether she had aborted. She refused to submit to an examination per vaginam. However, she apparently recovered; so much so, that she had been able to take much exercise; and on August 17th she had been with her husband to Dulwich, returned home in the afternoon, and entertained some friends to dinner, in apparent good health. About ten o'clock the next morning, as she was in the act of dressing herself, she was suddenly seized with a severe pain in the lower part of the abdomen (increased upon pressure), followed by syncope. Mr. Painter, a respectable practitioner in Howland-Street, was immediately sent for, who, on his arrival, found the pulse beating faintly, the skin cold, the lips and countenance excessively bleached; in-

dicating that there was some internal haemorrhage. He judiciously directed stimulants and applications to restore the natural warmth of the body, but they produced no benefit whatever. At five o'clock these symptoms became more alarming, and the vital powers continued to diminish until the time I saw her, which was about half-past twelve, when the pulse could not be felt at the wrist; and in an hour after my arrival she expired.

Examination post-mortem.—I examined the body about fifty-four hours after death, in presence of Drs. Merriman and Robert Lee, and Mr. Painter.

On opening the abdomen, we found between two and three quarts of blood in its cavity. On removing this, was found a tumor attached to the right fallopian tube, which, upon further examination, was found to be an extra-uterine conception of about ten weeks. There was a small laceration of the sac, from which the fatal haemorrhage had occurred. The embryo was perfect, with its umbilical cord and placenta. The uterus was somewhat enlarged, but healthy, and upon passing a probe through the fallopian tube there was no obliteration to account for the occurrence. A remarkable fact was observed in this case—that in the uterus no desiduous membrane was formed, as has generally been stated to be the case in similar instances, but the existence of which membrane in these cases has always been doubted by my friend Dr. Lee. The interior of the uterus was merely covered by a thin coat of mucus. The ovaria were natural. The right ovary contained a large corpus

luteum. The liver was enlarged, and unhealthy in its structure. The remaining viscera were healthy.

III.

MANY years ago I was consulted in the case of two sisters, the one seventeen, and the other eighteen years of age, who, though apparently in health, were supposed to be suffering from retention of the menses, for which they had been taking some popular herb medicines. They were tall, more than commonly muscular, of a blooming healthy hue, and without any sign of enlargement of the mammae. In other respects their appearance was perfectly feminine. Finding that they had no symptom of disease, I recommended that they should desist from medicine, on the ground that, to all appearance, they had not yet arrived at puberty, although in age they had certainly passed what is considered to be its usual period. Instances of an opposite description afterwards came under my notice. In one, where a girl menstruated at twelve, her mother and grandmother had, I found, become regular at the same age. In another, five sisters in one family menstruated at the age of eleven. These, and other cases in no respect morbid or irregular, but perfectly in the order of nature, led me to doubt whether the period of puberty was nearly so uniform as we are taught in books to consider it. This doubt, which may often have occurred to others, induced me to institute an investigation of the subject at the Board of the Lying-in Hospital of

this town. The result appears in the table which follows. The question as to the age at which they began to menstruate, was put indiscriminately to a certain number of the pregnant married women, on their coming to the hospital to deliver in their letters of recommendation as home-patients. These women are generally in health, as appears by their walking, in an advanced stage of gestation, from considerable distances to the hospital, the remote situation of which, is in the highest degree inconvenient to such patients, they being chiefly inhabitants of our widely extended and scattered suburbs. The circumstance of pregnancy is a guarantee, as regards the whole of the cases examined, of exemption from serious disease of the generative system. Owing to the great number of females who resort thither weekly affording abundant source for inquiry, no hesitation was felt at rejecting every answer which evinced either a doubtful recollection of the fact, or that the information was reluctantly afforded.* I may therefore affirm, that this table furnishes as accurate data as the nature of such an inquiry allows. And let it be remembered, that concerning the catamenial sign of puberty the word of the woman herself is, on any extended scale of investigation, the only testimony to be obtained.

* Perhaps it ought to be mentioned that the question relating to the period of puberty was put to each of the women along with other questions usual on the occasion, as, concerning the age, the occupation, the number of children, &c.; so that it did not appear as if put out of curiosity, or for a private end, but as one of the queries necessary to be answered, in order to her admission as a patient.

The following are the ages at which three hundred and twenty-six women began to have the catamenia.

Table.

In their 11th year	6	In their 16th year	54
" 12th "	12	" 17th "	50
" 13th "	31	" 18th "	19
" 14th "	60	" 19th "	18
" 15th "	72	" 20th "	4

One very obvious corollary I would draw from this table, namely, that the natural period of puberty in women occurs in a much more extended range of ages, and is more equally distributed throughout that range, than authors have alleged. And another, which claims particular attention, is, that did religion and our social institutions permit and encourage, in England, that early and unrestrained intercourse between the sexes, which, with the sanction of both, obtains in eastern and in almost all intertropical countries, it is to be supposed that we should witness instances amongst us of women becoming mothers at as early ages as eleven, twelve, and thirteen years. Other inferences that might be deduced from the table, I leave to the reader's ingenuity, as they would be foreign to the scope of my inquiry.—*Mr. Robertson, in North of England Med. and Surg. Journal.*

IV.

SCIATICA—PARALYSIS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—If these cases should be thought worthy a place in your Journal, I beg leave to offer them for publication.

From your humble servant,
PETER MANNING.

Case of Sciatica.

Mr. Joseph George, aged about thirty, tanner, of Amherst, N. H., consulted me January 11, 1828, for a lameness and weakness in the right hip, thigh and leg, accompanied with acute pain and coldness, followed with a numb, sleepy and prickly sensation. He stated that for a number of years he had been subject to severe attacks of rheumatism in different parts of his body, and that for a long time his health had been very much impaired, especially during the last six months ;—that in the last of August or first of September, 1827, he was exposed during the whole of a cold and rainy day,—rode on a waggon, seated on some lumber, some ten or twenty miles,—bruised his hip, and took cold ; same evening, was seized with sharp pain in the hip, shooting down to the foot—since which time, had constantly suffered more or less pain in these parts ;—that in the November following, had the same leg broken, which was reduced and attended by a surgeon in the vicinity, till the fracture was cured ;—that applications had been ordered to the whole limb and hip, by the surgeon, from time to time, notwithstanding the original disease had constantly increased ;—that so excruciating and undiminished had been his sufferings for several days and nights immediately preceding this, that he had not laid in bed, or been able to stand or walk ; but had been obliged to lie on the floor, as I then found him, without sleep. I found the muscles flabby ; skin rather shriveled and dry, with coldness to the touch ; the whole limb much wasted, and smaller than the left ; pulse small, feeble, easily com-

pressed, and somewhat accelerated : tongue coated with a yellowish-brown fur ; appetite impaired ; bowels costive ; nausea ; breath tainted ; sallow complexion, with general debility. An emetic-cathartic was ordered him first, and then he was put on a course of tincture of guaiacum and opium, in moderate doses, three or four times a day, in a little brandy and water,—mild purgatives, in such manner as to maintain a regular state of the bowels,—and a light diet. The following mixture was then ordered to be applied to the limb and hip :—

Take of Soap in shavings,

Camphor,
Opium in powder,
Water of Ammonia,
Oil of Rosemary, each 4 oz.
Galangal in coarse powder,
Winter's Bark in coarse
powder, each 3 oz.
Spanish flies in powder, 2 oz.
Alcohol 2 quarts.

Digest the soap, opium, flies, galangal, and winter's bark, in the alcohol, with a moderate heat, two days ; then add the camphor and water of ammonia : digest five days, and decant. The application to be commenced at the expiration of two days. This mixture was ordered to be rubbed liberally on to the whole surface of the hip, thigh and leg, warm, before the fire, with a quick motion of the hand, with or without a sponge, fifteen or twenty minutes each time, three times a day ; the parts then to be rolled firmly in a flannel bandage, beginning at the foot. This process ordered to be continued till a general and full eruption made its appearance on the limb ; then the mixture to be applied sparingly,

in such manner as to maintain the eruption; but the application to be stopped altogether, whenever it produced too much irritation or soreness, and a cotton or linen bandage to be substituted for the flannel, whenever the latter shall become uncomfortable. These directions were accompanied with an express injunction to the patient, to restrict himself entirely to a warm room.

January 19th.—Is better; no pain; laid in bed every night, and rested well, with the exception of two; able to stand and walk comfortably; muscles less flabby; skin more natural, not so cold; a scattering eruption has appeared over the whole limb and hip, in form of small pimples, with a degree of redness on some points; pulse more full and strong, less frequent; tongue becoming clean; appetite improving; bowels open; no nausea; breath less fetid; sallowness of complexion diminished. Course of treatment to be continued, with the addition of a stomachic, in medium doses, three times a day, with a more generous diet. Injunction to limit or stop the application of the mixture, &c., and to restrict himself to a warm room, repeated.

Jan. 29th.—Improving; no pain; laid in bed, and rested quietly, every night; more strength and firmness of the whole limb and hip; natural heat; eruption general, and moderately full, with a more extensive redness. One crop of pimples seemed to have been succeeded by another, in such manner, that there were on the parts a succession of crops, in their several stages of formation, growth and decline; some with abraded points, others entire. The eruption and soreness now

seems sufficient; pulse regular; tongue clean; appetite restored; countenance natural, with an increase of tone in the general system. He says he feels as well as ever, and is anxious to go abroad to his work. Treatment to be continued to the limb, in such manner as to maintain the present condition of the eruption, or to be suspended altogether, as circumstances shall require. Repeated my order to remain in his room till I should see him again. He then stated that he thought it unnecessary for me to call again; that if he needed further advice, he should call on me. I then took my leave of him.

Note.—This patient left the house immediately after I parted with him, and was exposed to the weather, from day to day, for the term of a fortnight,—a part of which time was very cold and wet,—at the expiration of which he suffered a dangerous attack of erysipelas phlegmonodes, from which disease he recovered in about three or four weeks.

The prescribing the mode of treatment, to the limb, detailed in the foregoing report, has been made a pretext for a most inhuman and vexatious prosecution. The writer has been charged with, and sued for, "carelessly, unskillfully and rashly prescribing for the said complaints, and causing a composition of ingredients, of such virulent and poisonous qualities, to be applied to said limb, in such a careless, unskillful and rash manner, that thereby the said George became and was poisoned throughout his whole body."

The case was brought to trial, at the September term, 1829, of

the Superior Court, held in Amherst, N. H., and resulted in a verdict for the defendant; who was able incontestably to substantiate, by the testimony of many of the most distinguished physicians in New England, that the treatment of the case, above referred to, was judicious and proper,—and that the subsequent erysipelas and sufferings of the patient were to be imputed wholly to his own imprudence.

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Case of Total Paralysis of the Right Arm and Hand.

March 14, 1824.—Miss Sylvia Stanley, of Merrimac, N. H., aged about fifty, requested my advice in the following case:—A total loss of the power of voluntary motion in the right arm, from the shoulder to the extremities of the fingers; the whole limb extremely emaciated; fingers rigidly inflexible; nails much curled, and white; skin dry, closely contracted, and wholly destitute of its natural complexion, accompanied with intense pain, and the various mixed sensations of sleeping, pricking, numbness, and coldness; * cold to the touch; general health impaired; symptoms indicated a morbid condition of the digestive organs. She stated that she fell on the ice, in attempting to cross the Merrimac river, and fractured the radius, a little above the wrist, in December, 1823;—that it was immediately reduced and dressed by a neighboring practitioner;—that the arm soon became swollen and very painful, and so continued

for some time;—at the expiration of about three weeks, a celebrated surgeon took charge of the limb, and thought he should soon be able to restore it. He commenced, and continued a course of treatment to the limb, for about six months, but with no good effect. By this time the limb had assumed the character described above. From this, to the time I first saw the limb, no application had been made by the order of any surgeon. I directed a course calculated to restore healthy action to the digestive organs, and improve the general health, together with the kind of treatment to the limb described in the case of George. Under this plan of treatment, in about five or six weeks, she was able partially to flex the fingers, and could raise the arm to her head. The mixture was then laid aside, and warm brandy substituted, and continued for a considerable length of time,—this followed with dry rubbing with the hand, flannel and the brush. Bandage continued to the end of the cure. In the course of five or six months from the commencement of the treatment, the limb was so far restored, that she was able to exercise it some in sewing, knitting, &c., and it had grown to near the size of the other. General health much improved. In about two years the limb was perfectly restored in every respect, and has so remained to this time—February, 1830.

It is worthy of remark, that no eruption or excoriation of the skin was produced on the arm, or any part of the body; although the mixture was applied to the whole surface of the limb, three or four times a day, twenty or thirty min-

* She remarked that "it seemed as though the limb would freeze, notwithstanding it had been kept constantly rolled in many coverings of flannel."

utes each time, for the term of five or six weeks.

Note.—It is now twelve years since I first made trial of this plan of treatment, during which time I have successfully treated a considerable number of like cases on this plan; neither of which, however, presented symptoms of so hopeless a character as this. No unfavorable effect, in any case, has ever been consequent to this mode of treatment; but it has less often failed to accomplish the ends looked for, than any other with which I have been familiar. P. MANNING.

Merrimac, N. H., April 7, 1830.

V.

WHETHER ANIMAL DECOMPOSITION IS PRODUCTIVE OF FEVER?

To the Editor of the Boston Med. and Surg. Journal.

SIR,—USHER PARSONS, M.D., has lately published an essay “on the comparative influence of vegetable and animal decomposition as a cause of fever.” This essay does honor to his talents and industry. Yet it has not made me a convert to all his opinions. I do not propose to review this work, but to offer some observations upon a part of it.

Dr. Parsons believes that vegetable matter in a state of decomposition is probably a cause of fever. That some exhalation from marshy and other soils is so, he considers as well established. But he also considers animal matter in a state of decomposition a cause of fever. He seems likewise to think it injurious to have cemeteries under churches or in the midst of cities; and this, prin-

cipally, on the ground that fever may be produced from their exhalations. On these points I have held different opinions, and it is on these I have some observations to offer. I submit them respectfully to his examination.

Dr. P. objects to the evidence adduced on this point by Bancroft, that this evidence is negative; and says that a very little affirmative evidence is sufficient to overthrow it. I do not propose to examine all his remarks on this subject. Various persons have stated cases in which fever has arisen from putrid animal matter. Now this evidence cannot well be met, unless we know all the circumstances in each case. Almost any opinion can be supported by facts loosely and briefly stated by persons who do not look closely into them. The best men often make such statements. Instead of examining all the reports given by Dr. P., I will notice only those derived from the late Dr. Rand, of this city, respecting the yellow fever in 1798. The learning and integrity of this gentleman are not to be doubted;—if they should be, I would rise in his defence. Yet I may be permitted to compare his statements, in 1798, with the facts since known—I might say, with the facts known before his death, and which I am persuaded wrought a change in his own opinions.

In 1798, the yellow fever appeared here, and was found, especially, about Forthill. Dr. Rand then looked for its cause, as other men did, and thought he could trace it to some masses of putrid flesh and fish about that hill. Persons near these offensive substances had the disease. It was fair to suspect the agency of

these substances in producing it. I believe that they had an agency; —that they were injurious to the health of the persons much exposed to them, and thus operated as occasional or exciting causes of the fever. But, however, I believe that the predisposing cause was from another source, and that this determined the disease to be what it was. In another year, when a milder epidemic was prevalent, that same exciting cause would have produced that milder disease.

In support of these opinions I state, that since 1798 the same yellow fever has appeared three times in this city, and each time it has appeared, as in 1798, about Forthill. On one of these occasions, the first cases of the disease were those of a lady, her son and daughter. They were all adults. They lived in the same house, but otherwise their exposure had not been similar. They were all taken on one day, and all died on the fifth day of the disease. Dr. Rand saw them with me, and we looked round the house in vain for any special cause of the disease. There was neither fish nor flesh undergoing putrefaction. The subsequent course of the epidemic induced many persons to look for causes of that kind, but without success. No explanation could be given, except that the cause of the fever came from the soil of the district where the disease prevailed; and that this cause did not act beyond a very small limit from its source, nor on any person who did not continue to be exposed to it for a long time. This was the result to which the investigation, in that year, led all impartial observers, as I believe. But is not this

greatly confirmed by finding that the disease has always appeared in the same district, when it has appeared in this city, for thirty years? In that period it has appeared four times, and, in each case, round that hill. In neither of the instances has it extended far from the same hill, and in three of the four it has been only on its borders. Does not this render it probable that there is some fixed local cause, which is eliminated in hot seasons upon this spot? This cause I hold to be a malaria from the soil.

Next as to cemeteries. I do not doubt that animal matter, in these or any other places, when suddenly emitting the gases generated during putrefaction, will be injurious to the health. Accordingly the practice formerly prevalent in Europe, of burying distinguished persons in the aisles of their churches and cathedrals, was an injurious one. In these cases the bodies were not placed in tombs in the cellar of the church, but were buried in the ground which constituted its floor. Here the ground cracking might allow the escape of the deleterious gases, and in a crowded church many persons at once might be greatly injured. Some of these persons might die immediately; others might undergo a temporary derangement of health; and in others, predisposed to fever, that disease might ensue. This happens from any derangement of the health; and hence the doctrine that epidemics convert other diseases to themselves. But if fever was directly produced by such exhalations from dead animal matter, the cases should be common, not rare, and to be picked up in a few scattered

records.—To this last suggestion Dr. Parsons has, I know, made a reply. He says that animal matter in a state of decomposition is so offensive, that we seldom allow it to remain where it can affect us; and that we ought not to look for its deleterious effects except in very hot weather.

Let us look at this statement. I shall not examine his argument in all its parts, nor stop to show that the decomposition of animal matter does not require just the same conditions requisite for vegetable matter, in order to render it offensive. But is it true that we rarely find men exposed in hot weather to animal matter in a state of decomposition? That this should be said by a man so conversant with affairs as Dr. P. is, shows how apt literary and scientific men are to think only of the facts which they find recorded in their libraries. Is not the experiment going on continually, winter and summer, hot years and cold years, in the neighborhood of all our cities and in every village? Is not this done in the slaughter houses, not to mention any other place where animal matters are collected? One cannot pass near a slaughter house without being offended by the evidence of the purpose to which it is devoted. To what concentrated effluvia then must the butcher be exposed, and in many cases the families which live immediately round the scene of his labors? It may be said that habit destroys, in such persons, the susceptibility to the injury to which they are exposed. But there must have been, in each instance, a time when the habit was not formed. Now an inquiry into this matter will, I

think, satisfy Dr. P., as it has me, that persons so exposed are not peculiarly subject to fever. On the other hand, the occupation of a butcher is thought to be a healthy one. This opinion is so prevalent, that men sometimes engage in this occupation because they are unhealthy.

To return to the subject of cemeteries. I once entertained the objection to the establishment of these in the midst of cities, which is still maintained by many of our profession. I care not to engage in the general question now. I was called, many years since, to consider this matter in relation to our own city; and then satisfied myself that here, at least, graveyards are not injurious to the health of the citizens. This opinion was formed not by looking into books, but by looking round the town. We have several graveyards which have been used for many years, and two of them are in the centre of the town. We have likewise two churches, in the cellars of which there have been tombs built, perhaps before any one of the present generation was born. If these places had been sources of disease, it must have become known. I have myself spent years in their immediate neighborhood. I know that the persons living around these burial grounds, and those who have frequented these churches, have not been peculiarly affected with fevers nor with any other disease. On the contrary, the house-lots around the graveyards have been valued very highly. The open spaces have rendered the surrounding houses more pleasant, and I believe more healthy, by the free admission of air and light. On this account, I have

wished that all graveyards should be in the centre of cities, so as to promote a healthful ventilation.

If the statements I have made are correct as to slaughter houses and as to our cemeteries, we may be justified in discarding the fears of "animal decomposition" entertained by Dr. P. and others, so long as we are not exposed to the products of this decomposition in a very concentrated state; and even then, fever is not the disease to be feared, except in persons previously exposed to that disease.

Yours, &c. J. J.
Boston, Nov. 19, 1830.

VI.

EMPHYSEMA OF THE FACE, FROM FRACTURE OF THE ANTRUM MAXILLARE.

To the *Editor of the Boston Med. and Surg. Journal.*

SIR,—A lady of this city being engaged in some occupation about her kitchen fire, on stooping suddenly struck her face with a good deal of force against the sharp top of an old-fashioned andiron. The blow at first nearly stunned her. It took effect on the left cheek, just below the protuberance of the malar bone,

and directly over the antrum. A short time after recovering from the immediate effects of the shock, upon blowing the nose, the face, around the injured part, became puffed up; and in a few minutes, before she was aware of the nature of the difficulty, the swelling had extended over the whole side of the face, and extended down the neck nearly to the shoulder. It passed also a little over upon the right side. The tumor was distinctly emphysematous, was accompanied by no pain, and subsided spontaneously in the course of a few days, leaving only a little discoloration of the skin, and an adhesion of the skin to the parts beneath, which still remains, producing a pit or depression at that spot. A little blood was discharged from the nose by blowing, and there can be no doubt that the injury consisted in the fracture of the anterior wall of the antrum, accompanied by a laceration of the cellular membrane. Through the opening thus made the air was forced, on blowing the nose, into the interstices of the cellular membrane.

Very truly yours, &c.

JOHN WARE.

BOSTON, TUESDAY, NOVEMBER 30, 1830.

VARICES.

THE late researches of pathologists on the subject of phlebitis, have given to every malady of the veins a great additional interest, which has not failed to extend itself to the morbid enlargements of these organs so frequently noticed in the lower extremities. As these sometimes proceed

to a very troublesome extent, and cause considerable alarm from the hemorrhages they occasion, it has been thought very desirable to obtain for them, if possible, a radical cure; and the question has suggested itself to surgeons, whether this might not be effected, as in aneurism, by one or more ligatures placed on the dis-

eased vessel. Both these operations have been tried; and we have now before us an account of their respective success, from which we select the following facts:—

The first mode is that of a single ligature, applied to the venous trunk in which the affected veins terminate. This has been done with a view perfectly similar to that with which the artery in aneurism has been tied beyond the tumor. It has been expected by this means to cause a coagulation of blood below the ligature, and thus the obstruction of the vein which it traverses. This plan, however, is not found to answer fully the end proposed. It appears that the obliteration in these cases takes place only in the immediate vicinity of the point operated on, and not through the whole extent of the varicose portion. This defect, however, does not become evident until a certain period after the operation is performed. So long as the wound is healing, the patient is obliged to maintain a horizontal position, and to preserve entire rest. The consequence of this circumstance alone, is the diminution of the venous enlargement; so that when the confinement ceases, the disease appears to have been wholly removed. A short time, however, suffices to show the fallacy of this expectation. Scarcely has the patient left his apartment, and resumed his ordinary occupations, when the tumors begin to reappear; and thus nothing is gained beyond what would equally have been secured by rest alone. On the other hand, the hazards of the operation are by no means trifling. There is

no small probability of inducing phlebitis; and the danger from this source is quite sufficient to overbalance any advantage to be expected from the operation itself.

The other operation above alluded to, has for its object, to include the diseased portion of vein between ligatures, and intercept its connection with the sound portions both above and below it. It consists in tying the venous trunk below the point where the varicose dilatations commence, and also below that where they empty themselves. Thus, to cure varices of the leg, the internal saphena would be tied on the level of the malleolus, and just below, or even above, the level of the condyle. Dupuytren has employed this method repeatedly in varicose affections, and has constantly obtained that effect which was wanting in the case of the first operation, namely, the obliteration of the diseased vein. But, though infinitely preferable, on this account, to the former plan of proceeding, it affords no protection whatever against the dangers involved by it, and by making necessary two ligatures of the vein, evidently increases the chance of inflammation. It cannot, therefore, be safely recommended.

Setting aside, then, the chance of relief from operation, the only course remaining in this troublesome affection is, to diminish the current of blood through the vein, and thus, by taking off the dilating force, to enable it to resume its original dimensions. This, as is well known, has very frequently been attempted, with considerable success, by the aid of

elastic stockings and bandages. Although these means do not always effect a cure, they never fail to afford relief, and to render the situation of the patient more comfortable. Even this remedy, however, may require some precautions, to obviate the danger of venous congestion, when a large amount of the circulating fluid has thus been withdrawn from its accustomed channel. This idea, which is reasonable in itself, is farther confirmed by actual experience. The distinguished surgeon above alluded to, asserts that he has frequently known congestions produced in the viscera, and even apoplexy itself to be brought on, by the reflux of blood consequent on the compression of numerous and large varices of the inferior extremities. Where these exist, therefore, the direct curative means should be preceded by venesection, so as to diminish for the time the amount of circulating fluid. By adopting this preliminary, the patient is defended against any untoward accident, and the full benefit of the succeeding treatment is secured.

MEDICAL SCHOOL IN EGYPT.

DR. CLOT, a Frenchman, who is at the head of the medical department of the Viceroy of Egypt, has recently founded a medical school at Abou-Zabel, a few miles from Cairo. Many obstacles presented themselves to this undertaking; one of the most important of which was the difficulty of establishing the means of communication between the pupils and their

masters,—the young Arabs being ignorant of the European languages, and the teachers knowing little or nothing of Arabic. This being surmounted by a Mr. Ucelli instructing the Arabs in French as a preliminary step, religious scruples next presented themselves, and gave rise to many conferences with the native priests. Fortunately, the result was to convince them that the study of anatomy was no profanation of the dead, while it contributed essentially to the preservation of the living. Permission was obtained to prosecute dissections with discretion, and the dislike of the pupils to the dead bodies being soon subdued, dissections are now carried on in Egypt with as much freedom as in Europe.

London Med. Gaz.

New Medicine.—It is stated, in a letter from Rome, that the French medical men in that city continue to administer, with great success against intermittent fevers, the bark of the willow. These gentlemen assert that it has more power than Peruvian bark.

Fossil Bones.—An immense quantity of the fossil bones of the hippopotamus, the elephant, the mammoth, and other species of animals no longer in existence, has been recently discovered in a cavern near Palermo.

Smallpox.—One case of this disease was found in High Street, we understand, last week, and several persons have been exposed to the infection. We trust our vigilant police will delay no longer the contemplated measures for affording security against the spreading of this shocking malady.

Whole number of deaths in Boston the week ending November 18th, 19. Males, 7.— Females, 9. Stillborn, 3.

Of lung fever, 1—infantile, 3—inflammation in the bowels, 1—unknown, 2—consumption, 3—inflammation in head, 1—liver complaint, 1—croup, 1—burn, 1—teething, 1—old age, 1.

ADVERTISEMENTS.

VACCINE VIRUS.

NATHON JARVIS, on account of frequent solicitations, will constantly keep for sale FRESH VACCINE VIRUS, taken by a physician from *healthy* subjects. It will be furnished at a reasonable price on demand, either in scabs or quills. Physicians in the country who are in want of Virus, can send their orders by mail, as it can be enclosed in a letter and transmitted without any great expense of postage. June 1.

*Apothecaries' Hall,
No. 183 Washington Street.*

PRIVATE MED. SCHOOL.

THE subscribers have associated for the purpose of giving a complete course of private Medical Instruction, and the following arrangements are now in operation:-

The pupils are admitted to the practice of the Mass. General Hospital, and receive Clinical Lectures on the cases from Drs. Jackson, Channing and Ware.

Private Lectures, with examinations, are given in the intervals of the public lectures of the University.

On Midwifery and the Diseases of Women and Children, and on Chemistry, by Dr. CHANNING.

On Physiology, Pathology and Therapeutics, by Dr. WARE.

On the Principles and Practice of Surgery, by Dr. OTIS.

On Anatomy, Human and Comparative, by Dr. LEWIS.

Private Instruction will be given in Practical Anatomy, by means of demonstrations and dissections.

Such students as may be disposed, will have opportunity of acquiring a knowledge of Practical Pharmacy.

Rooms for all the purposes contemplated, have been provided in a convenient and central situation.

Application to be made to Dr. WALTER CHANNING.

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July 6.

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Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

ANATOMICAL LECTURES.

DRS. J. V. C. SMITH and J. B. FLINT, will commence their Fourth Course of Evening Lectures on Practical Anatomy and Physiology, at the Columbian Hall, Tremont St., on Wednesday evening, Nov. 27th—at 8 o'clock. Tickets for sale at the Bookstore of Cottons & Barnard, Washington Street, corner of Franklin Street.

GERMAN LEECHES.

RICHARD A. NEWELL, Druggist, Summer Street, respectfully informs the Physicians and Public generally, that he has just received a fresh supply of the above-named *Leeches*, which will be sold at a fair price.

N. B.—Leeches sent to any part of the city, and applied, without extra charge, by day or by night. 6w—Nov. 8.

SURGEON DENTIST'S MANUAL.

JUST received, by CARTER & HENDEE, The Surgeon Dentist's Anatomical and Physiological Manual. By G. WAITE, Member of the Royal College of Surgeons. Nov. 2.

NEURALGIC DISEASES.

ATREATISE on Neuralgic Diseases, dependent upon Irritation of the Spinal Marrow, and Ganglia of the Sympathetic Nerve. By THOMAS PRIDGIN TEALE, Member of the Royal College of Surgeons in London, &c. Just received by CARTER & HENDEE. Nov. 2.

SURGICAL INSTRUMENTS AND CHEMICALS.

STUDENTS in want of the above articles, would do well to call, before purchasing, at BREWER & BROTHERS', Nos. 90 and 92 Washington Street—Boston. Oct. 15.

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JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.